

## COMMUNICATION ACCESS REAL-TIME TRANSLATION (CART) SERVICE REQUEST FORM

PLEASE FAX TO: City of Los Angeles Department on Disability
Disability Access and Services Division

(213) 202-2715 FAX

For any questions, please contact DOD at (213) 202-2764 Voice or (213) 202-2755 TTY.

APPOINTMENT DATE:	TIME:  AM PM TO: PM
REQUESTED BY:	PHONE:
DEPARTMENT:	BUREAU:
LOCATION OF EVENT:	
ADDRESS: ROOM:	CITY: STATE: ZIP:
CROSS STREET:	PARKING:
CONTACT PERSON:	PHONE:
PROGRAM PARTICIPANT:	
SITUATION:	
□ ONE-ON-ONE □ STAGE OR PLATFORM   □ SMALL GROUP □ LARGE	
THE HOSTING DEPARTMENT WILL PROVIDE ONE OF THE FOLLOWING:	
<ul><li>□ T.V. MONITOR</li><li>□ PROJECTOR SCREEN</li><li>□ LCD PROJECTOR</li><li>□ OTHER</li></ul>	
SPECIAL INSTRUCTIONS:	
NAME OF PROGRAM/ACCOUNT FUND:	XXX 504/ADA OTHER
DEL / (( TIME IT )	DIVISION/BUREAU: Disability Access and Services
ADDITEOS. 2011. Figurios diseases	SUITE: 100
0111. <u>2567 ingoles</u>	STATE: CA ZIP: 90012
ATTENTION:	
AUTHORIZED BY:	DATE:
OFFICE APPROVAL:	DATE: